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J. Douglas  
3/17/04

PATENT

Docket No. 745442-20

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: )  
Luc VANTALON et al ) Group Art Unit: 2614  
Serial No. 09/444,488 ) Examiner: Sheleheda, James R.  
Filed: November 19, 1999 )  
For: DIGITAL TELEVISION )  
CONDITIONAL ACCESS METHODS  
AND APPARATUS WITH MULTIPLE  
DATA TRANSPORT MECHANISM )

CERTIFICATE OF MAILING OR TRANSMISSION  
[37 CFR 1.8(a)]

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Signature: \_\_\_\_\_

Name: Stuart J. Friedman

**RESPONSE TO RESTRICTION REQUIREMENT**

**M/S NON FEE AMENDMENTS**

Honorable Commissioner for Patents  
P.O. Box 1450  
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Sir:

In response to the Office Action mailed February 11, 2004, Applicant elects, without traverse, the invention of Group I, consisting of Claims 1-18 and 33-42.

Respectfully submitted,

\_\_\_\_\_  
Stuart J. Friedman  
Registration No. 24,312

28930 Ridge Road  
Mt. Airy, MD 21771  
Telephone: (301) 829-1003  
Facsimile: (301) 829-4107



2614

PTO/SB/21 (02-04)

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Application Number	09/444,488
Filing Date	November 19, 1999
First Named Inventor	Luc VANTALON
Art Unit	2614
Examiner Name	James R. Sheleheda
Attorney Docket Number	745442-20

Total Number of Pages in This Submission

**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please Identify below):
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**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Stuart J. Friedman 28930 Ridge Road Mt. Airy, MD 21771
Signature	
Date	March 9, 2004

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